SDMS Document ID
2030860

March 11, 2003

Re: 3/11/2003 TAG Meeting

I. Call To Order
II. Introductions
III. Approval of Minutes from Feb. Meeting
IV. April Meeting Date: 4/8/03 (Tuesday before monthly CAG Meeting on Thursday)
V. Old Business
   A. Update Status of 501C-3/Approval from Sec. of State
   B. Confirmation of LATAG Board Members
   C. Update Status of Technical Advisor/Administrative Personnel Search (Job Descriptions ?)
VI. New Business
   A. Election of Board Leadership
VII. EPA Report (3/7/03 Draft-Vermiculite Insulation Removal from Walls)
VIII. Questions and Comments

NOTES: REMEMBER THE WORKSHOP SCHEDULED FOR 4/24-4/26 (SO. LIN. CO. REVITALIZATION)

2/14/03

Re: 2/11/03 TAG Minutes

Attendees: Refer to sign-in sheet

The meeting was called to order by acting chairman, George Keck.

The March meeting date was set for 3/11/03 at FNB meeting room at 7:00 PM.

Ann German moved & Pat Naughton seconded the motion to accept the January minutes with correction of the February meeting date.

The 501C-3 & State applications are still in pending status.

The following names were presented as potential board members (5-11 persons per By-laws):Red Morton, Pat Naughton, Bob Beagle, Jerry Hersman, Mary Tevebaugh, Jon Reny, Charlene Leckrone, Bob Zimmerman, Rick Flesher, George Keck, Sandy Wagner, Joyce Baeth. George will continue to recruit persons and confirmation of members will be acted upon at the March meeting.

George will proceed with the job descriptions for the administrative assistant and technical advisor positions. Hopefully, these can be presented for review and comment at the March meeting.

The 2/28 TAG workshop in Arizona was briefly discussed. Due to time and funding constraints Libby will not participate in this one but will be on the mailing list for the next one. We will try to get handouts from this workshop from a participant or presenter.

Sandy briefed the group on the upcoming So. Lin. Co. Revitalization workshop.

Jim discussed public concerns:
1. He has worked with several individuals in regards to questions from lending institutions. Loan qualification or disqualification is such a complex issue, that it is best handled on a "per" case basis. Jim will continue to be of assistance to Libby area applicants.
2. It is most important that we continue to educate individuals in regards to the asbestos issues that may arise in the loan application process.
3. Jim was not aware of the T. Falls mill concern/safety meeting on possible abestos contamination from logs from the Libby area.
4. Jim has provided Plum Creek and the Forest Service with guidance on safety precautions for logging operations. Chris Weis is also reviewing the guidance documents. There is no money currently available for testing.
5. Jim will continue to provide the EPA center with reports, work plans, etc. pertaining to the Libby area clean-up operations. These are open for public review and comment.

There being no further business, the meeting was adjourned.

LIBBY
COMMUNITY ADVISORY GROUP
MONTANA

c/o EPA Information Center, 501 Mineral Avenue, Libby, Montana 59923
1-406-293-6194

February 20, 2003

Spokesman Review
Attn: Susan Drumheller
100 North First Avenue
Sandpoint ID 83864

Dear Interested Party:

The attached letters have been sent to Christine Todd Whitman, administrator of the United States Environmental Protection Agency, and Montana's U.S. congressional delegation by the Community Advisory Group and concerned citizens of Libby, Montana, who seek to have Libby declared a public health emergency as defined in U.S. Superfund law, CERCLA, section 9604 (i).

In April, 2002, the United States Environmental Protection Agency was on the verge of issuing a Declaration of Public Health Emergency for Libby, based on facts compiled by top EPA scientists including Paul Peronard and Chris Weis. Then with no explanation or warning, Ms. Whitman cancelled the EPA declaration.

This is very unacceptable to us. Several thousand people in Libby were exposed to unregulated releases of extremely toxic tremolite asbestos from a mine operated for decades by W.R. Grace & Company. In medical screenings conducted in 2001 by the U.S. Agency for Toxic Substances and Disease Registry, almost 2,000 people of the over 7,000 screened were found with medical signs of exposure to tremolite asbestos.

Libby, Montana, has a health emergency <u>now</u> and we respectfully request that the EPA issue a Declaration of Public Health Emergency so that health care coverage will be provided for all the people who will need it as a result of environmental exposure to tremolite asbestos.

Thank you.

Signed: Community Advisory Group and Concerned Citizens — Names Attached (See letter text)

Text of letter from Community Advisory Group to Representative Denny Rehberg (R-Mont.) Jan.16, 2003

Honorable Denny Rehberg
516 Cannon HOB
Washington, DC 20515

Re: Libby Asbestos Issue

Dear Honorable Rehberg:

As we begin a new year, the Libby community would like to take this opportunity to thank you and your staff for your commitment and the many hours of work your office devoted to assisting us in identifying and finding workable solutions to the W.R. Grace toxic contamination issues. Together, we have come a long way since November 1999, but we still have many challenges before us in 2003.

Working together, progress has been made. ATSDR screened over 7000 persons to determine the scope of the health impact on our citizens and are now in the early stages of establishing a registry of our exposed population. Libby School District has received a small grant that enables them to establish a registry of our "at-risk" school age children. Nearly 1700 children have been entered into the data base at this early point in the process.

Federal funds have allowed us to update our local hospital facility and operate the Center for Asbestos Related-Disease and the CORA program for the past two years. We now have the Lincoln County Community Health Center to benefit not only those affected by asbestos-related disease but every citizen in need of primary health care services.

The EPA Emergency Response team sent to Libby has done an excellent job of addressing a toxic waste situation of a magnitude never seen before in America. With the joint co-operation of our city, country, state and federal officials, Libby is now an NPL site and beginning the property clean-up operations. We applaud your efforts in making the remediation process move quickly and assisting us in identifying a mechanism whereby Zonolite insulation could be removed from our homes and businesses.

We still have several challenges before us in the next several months. Though we have made small strides in addressing our peoples health care needs on a short-term basis, no long-term commitment to assist with the specialized health care coverage required by some 1200 individuals to date and probably several thousand over the course of the next 40-50 years has materialized. We have not been able to identify any truly "comprehensive" solution to date. We do know that the responsible party, W.R. Grace, has filed bankruptcy and consequently the victims of their deceitful practices will never be compensated for their losses. We know that Grace's voluntary Libby Medical Plan, limited at best, could bankrupt the already-financially-strapped state of Montana and severely impact the federally-funded Medicare system. We do know that without a comprehensive long-term medical program tailored to the needs of this potentially fatal disease, many affected individuals will die destitute. We know that we as a community have an obligation to work closely with our political leaders, our health care professionals, and those affected by this attrocity to find a means by which these indi-

Text of letter from Community Advisory Group to Representative Denny Rehberg (R-Mont.)

viduals have access to the best health care available.

We are asking for your office contact the appropriate parties to again consider declaring a public health emergency as defined in CERCLA but this time focusing the need to use this mechanism to provide the appropriate and adequate health care services for the asbestos-related disease population. Libby's situation is most unique; we have had 40 years of unregulated exposure to the deadly toxic tremolite asbestos fiber. As there has only been one 9/11, there has only been one Libby – we are the definition of a true "public health emergency." It is not necessary that the federal government rush to Libby and build a hospital with a long-term nursing care wing. We can upgrade our existing services, co-ordinate with other facilities in the immediate area such as Kalispell, Missoula, and Spokane. At a fraction of the cost associated with "reinventing" the wheel and at the same time helping to stabilize our local economic base, we can provide our people with a comprehensive, flexible medical coverage program. To further discuss this concept and to prepare ourselves for the "next" step, we are asking that you or a representative from your office attend our next community advisory group meeting scheduled for Feb. 13, 2003, at 7 p.m. in the Ponderosa Room of the Libby city complex. Your input is vital to our moving forward on this urgent issue.

Please forward your comments to the CAG at P.O. Box 153, Libby, Mont. You may also fax your response to 406-293-6969.

Thank you, and we look forward to seeing you in Libby on Feb. 13.

Sincerely,

Community Advisory Group:

David F. Latham .....Editor, The Montanian
LaMar Lindsay .....Libby, Mont.
Donald Munsel ..... Libby, Mont.
Eva Thompson .....Libby, Mont.
Leroy Billadeau .....Libby, Mont.
Les Skramstad ..... Libby, Mont.
Don W. Wilkins .....Lumber & Sawmill Workers
Rosemarie Munsel ..... Libby, Mont.
Rick Palagi ..... St. John's Lutheran Hospital
Jan Meadows ..... Libby, Mont.
K.W. Maki ..... Libby Public Schools
Sarah Crill ..... Concerned high school student
Billie S. Moeller ..... Libby, Mont.
Carol J. Latham ..... Publisher, The Montanian
Michael Crill ..... Libby, Mont.
Mary Tevebaugh ..... Libby, Mont.
Catherine Tolgyessy ..... Libby, Mont.
Gary D. Swenson ..... Libby, Mont.
Daniel E. DeShazer ..... Libby, Mont.
Iva A. DeShazer ..... Libby, Mont.
Richard Flesher ..... Victim, Libby, Mont.
LeRoy Thom .....Former Grace employee
Norita Skramstad .....Asbestos Victim
Bob Zimmerman
Diane Keck ..... Asbestos Victim
Jerry Hersman Business Owner & Technical Assistance Grant group
George Keck .. Community Advisory Group and Technical Assistance Grant group
Clinton Maynard . CAG member, Area Asbestos Research Group
Gayla Benefield ...Lincoln County Asbestos Victims Relief Organization
Gordon Sullivan ..... Focal Point, Inc.
Sandy Wagner .....CAG and TAG
George Bauer ..... Libby City Council member

Text of letter from Lincoln County commissioners to Senator Max Baucus, Jan. 29, 2003

Dear Senator Baucus:

We have recently reviewed a letter being sent to you by the Citizens' Advisory Group (CAG) of Libby. The letter thanks you for the strong support your office has given our communities in dealing with the severe asbestos contamination that we face. We would also like to express our utmost gratitude to you for this support.

The letter written by the CAG addresses the problems that we will be facing in the future, specifically the health care needs of those currently affected by asbestos related disease (ARD) and those individuals that will be affected in the future. This is a continuing major problem that must be resolved.

The CAG is requesting that a public health emergency be declared as a mechanism to provide the important health care that our citizens need. We support this concept if it is necessary to provide these much-needed services.

We understand that this is a complicated issue. We look forward to discussing this plan or any identified alternatives with you or your representatives in the near future.

Sincerely,

John C. Konzen, chairman

Marianne B. Roose, member

Rita R. Windom, member

Text of letter from Community Advisory Group to Senator Patty Murray, Jan. 22, 2003

Senator Patty Murray
173 Russell Senate Office Building
Washington, DC 20510

Re: Libby Asbestos Issue

Dear Sen. Murray:

The Community Advisory Group of Libby, Mont., applauds you for your support of the asbestos issue nationally, and particularly, your support shown for the residents of Libby.

Our group has made the decision to once again, attempt to regain support that the Public Health Emergency that was under consideration by the EPA last spring be reconsidered.

To date, millions of dollars in investigation, scientific and clean-up operations have come to Libby, but to date, not one dollar has come to assist the medical needs of the real victims of the asbestos contamination.

The federal government, namely ATSDR, conducted two separate screenings. Of the 7500 participants, approximately 30 percent were given the diagnosis of some abnormality of their lungs. In these people, the disease varies from lung abnormalities, to pleural plaquing, full asbestosis and for some, lung cancer.

Our medical needs are totally dependent upon the good will of W.R. Grace, the company that is responsible for our illness. The medical program that is in effect could be taken away at any time, leaving hundreds of people who qualified across the nation, without any means to pay the high cost of treating the disease.

For that reason, we are asking our Congressional Delegation to once again, reopen the possibility of declaring people exposed to our fiber to be protected by a Public Health Emergency.

We are enclosing a copy of the letter to Sen. Baucus, Sen. Burns and Congressman Rehberg for you to view. Because of the close proximity of Washington state to Montana and the expanding and processing plants in your state that received the ore directly from the Libby mine, we ask you to join our Congressional Delegation in supporting our efforts.

Our community Advisory Group meets on the second Thursday of each month in the Ponderosa Room of the city of Libby complex.

We would be honored to have someone from your office present.

Sincerely,

The Community Advisory Group

DRAFT 3/7/03 - For discussion with TAG

Does EPA plan to remove vermiculite insulation from walls? In general, no. Our current standard during emergency response is that we will leave vermiculite insulation inside of walls that are in good condition. We will only remove insulation if the wall is in poor condition (which may mean a new wall). In some cases, we may simply repair or alter a wall to eliminate a leak. We may also make some small exceptions for renovations that are in progress or imminent.

When we identify vermiculite in a wall and decide to leave it in place, we will generally vacuum what we can from existing access points such as electrical outlets and along the top margin of the wall in the attic, then seal off the access points with foam to ensure that the remaining insulation remains sealed in the wall. In this way, the only way the insulation will be contacted or disturbed in the future is if the wall is breached, and it will not spread to the cleaned attic or to the living space if outlets are removed.

It is also worth noting that we may leave vermiculite in certain other locations where it is well-contained, such as at depth in soil, beneath hard surfaces such as concrete driveways, or in non-friable building materials such as mortar. Such an approach of addressing the material most likely to be encountered is typical of thousands of other cleanups performed by EPA and others. Situations where contamination is left in place are generally handled by an "Operations & Maintenance (O&M) Program. The O&M Plan will be developed as part of EPA's final decision on long-term response actions, which will occur after a risk assessment, remedial investigation, and feasibility study are completed in a few years. EPA's final decision is subject to extensive public review.

What did EPA consider when making this decision? We weighed the pros and cons of (1) removing the insulation, (2) demolishing the home, or (3) or leaving it in place. Option (3) was by far the preferred solution.

Option 1. Comprehensively search for insulation in walls and remove it if found.

Pros

1. All potential health risk, current and future, is eliminated. No concern when breaching walls in the future.
2. No negative effect, real or perceived, on real estate value.

Cons

1. At present, we identify insulation in walls if we observe it during our visual inspection, and we check for visible vermiculite leaking into the living space, but we do not systematically investigate the interior of all walls. If EPA's standard was to remove all vermiculite insulation from walls, then we would be obligated to comprehensively investigate all walls in all properties - if we felt vermiculite insulation in walls presented enough risk to justify removing it, then we

couldn't just remove it at certain properties or in certain situations where we bumped into it. There are several reasons why it would be exceptionally difficult and costly to perform such an investigation. First, vermiculite insulation can become present in a wall in two ways - either it was put in the wall directly in bulk or it trickled down from the attic. The latter is much more common, and in some cases can also lead to a relatively large amount if insulation in the wall. This means that nearly every wall in homes with vermiculite attic insulation, interior and exterior, is at least suspect. Each wall is also unique. That's a lot of walls to look at. Also, we know that the bulk insulation will not be uniformly distributed within a particular wall (e.g. it may be only above a firebreak or only along the floor boards), so to ensure there is no insulation would require looking in multiple places. Such an inspection could only be performed with invasive methods, such as poking multiple holes in the wall or removing exterior siding. In some cases, asbestos could be present that wasn't visible, and could only be detected with sampling. Overall, an effort to comprehensively investigate all walls would be exceedingly costly, time consuming, and difficult to perform consistently from property to property.

2. For walls found to have insulation, a truly effective and meaningful cleanup program - one that would allow EPA to state the wall would pose no health risk if breached - would require removing *nearly all* of the asbestos in the wall or getting rid of the whole wall. Removing only some of the insulation, or failing to encapsulate porous surfaces after it is removed, would likely leave residual material or fibers that would still pose some level of health risk if the wall is breached in the future. For instance, when we clean an attic, we don't clean just a portion, and we don't just remove the bulk insulation. We also meticulously clean in the cracks and then encapsulate the plywood when finished. Only then can we guarantee it is safe under any circumstance. Similarly, when we clean the interior of homes, we meticulously HEPA vacuum and wet wipe all surfaces. This fact means that "half solutions"for walls, such as vacuuming what we can from holes in the bottom of a wall (which also has a cost associated with it), won't completely solve the problem. In fact, one could even argue that a half solution could make the situation worse because (1) it may imply that the wall has been "cleaned" when it fact it has not, and (2) it may remove the visible vermiculite that would warn someone cutting into the wall that there is a potential problem, while significant asbestos still remains. Given these issues, EPA feels the only way to truly make walls free from future concern is to either remove the wall and rebuild it *or* remove one side of the entire wall, clean out the entire area, possibly encapsulate porous surfaces, and then restore the wall. Such an effort would be exceptionally difficult and time consuming, even if just a fraction of all walls are contaminated.

3. EPA would estimate that truly making the walls free from any future concern, as described, could triple the cost and duration of insulation removals. Depending on how many walls were found to have vermiculite, my guess is that could mean as much as 6 years and $50 million dollars just for this effort, not including the costs to comprehensively investigate the walls, which would cost millions alone. Homeowners may have to be displaced for weeks instead of days. In this case, it could be cheaper to demolish the home and compensate the homeowner (see Option 2 below).

4. Most importantly, vermiculite contained in a wall or other "inaccessible" space presents no health risk unless the wall is breached, which is in general a very rare event. Even when breached, the exposure would generally be to a relatively small amount of material and of a short duration, and can be managed with some simple procedures. The cost and time required for systematically removing insulation from walls does not justify the small amount of risk reduction

that would be achieved. While EPA doesn't dispute that some level of potential health risk would remain with vermiculite left in walls, we assert that the risk would only occur if the wall is breached (walls cannot be entered like an attic) and is one of the smallest risks faced by Libby residents. EPA's goal is not to eliminate all risk, but to eliminate excessive risk. Eliminating all risk is impossible both on a micro and a macro scale. We face risks everyday from household chemicals, lead paint, traffic accidents, smoking, etc. There are other "normal" asbestos containing materials in Libby homes (e.g. pipe wrap or floor tiles) that if disturbed would present a risk, and we are not removing those. EPA will not remove insulation from even the attics of the other homes across the country that have vermiculite insulation, or remove vermiculite used in soils across the country. Most urban areas have background levels of asbestos (e.g. from brake shoe dust or asbestos containing building materials) that are much higher than what will be left in Libby. In the end, even though EPA will leave some asbestos in Libby, it will be a much safer place to live than most places in the country. The bottom line is that the huge amount of money required to effectively screen for wall insulation and systematically remove it from all walls does not justify the small reduction of risk it would provide.

However, as an extra precaution, EPA will try to mitigate what potential risks remain after our cleanup is complete through such means as education (e.g. general education pamphlets and guidance for working with vermiculite), informing property owners of where the material is or might be (directly in writing after cleanup), providing every property owner that undergoes cleanup (or properties that don't qualify for cleanup but have low levels of asbestos in dust) a high quality HEPA vacuum when we are finished, and other steps. Additionally, EPA's final decisions for the site - the non-emergency part - will be put forth for public review in a few years after a risk assessment and remedial investigation/feasibility study are complete.

5. Lastly, whether investigating and cleaning walls adds 2 years, 4 years, 6 years to the duration of home cleanup, an increase in duration would mean that it takes longer for us to get to all properties in Libby. That means we delay cleaning up the interiors of other people's homes with high dust levels, removing attic insulation from other houses, and removing vermiculite from other yards. These are exposures that we know may be occurring today. Unfortunately, the reality of the situation is that by taking valuable time and resources to address a lesser "future" exposure, we would have to delay addressing current exposures that are generally much more serious. What is the cost in health risk for those who must endure the additional delay?

Option 2. Search for insulation in walls, demolish buildings with insulation in walls, and compensate the property owner for the fair market value of the real property only. (Either as a stand alone option or at properties owner's request in lieu of Option 1). When demolishing a property, the only reasonable options available to the Government in this situation are to pay fair market value for the real property (generally not the land if we can make it safe) or to replace the real property in kind, and EPA absolutely will not rebuild homes on a mass scale.

Pros

1. All potential health risk, current and future, is eliminated.
2. No negative effect, real or perceived, on real estate value.

Cons

1. Costs would still be extremely high. It isn't just the cost of a settlement for the real property - EPA would also have to pay for cleaning, transporting, and storing (or compensating for) household goods; temporary lodging for those residing in the home; demolition of the original building and disposal of the debris in an asbestos landfill; excavation and disposal of any contaminated soil at the property; and negotiation of a settlement with the property owner including attorneys and appraisal fees. This is one of the reasons why the work at the screening plant and export plant was so expensive. While this option *could* be cheaper than removal of insulation from walls, it also may not be. It is certainly still far more expensive than leaving the insulation in place. Systematic investigation of walls would still be required.

2. Large scale demolition of homes in Libby would not help the community recover.

3. Fair market value of an older structure in Libby (asbestos impacts aside) would likely not be sufficient to rebuild a similar new structure in place or purchase a home elsewhere. Homeowners would have to rebuild a smaller structure, cover the difference on their own, or attempt to sell the land and move.

4. This option also would lead to extended cleanup durations, probably longer than cleaning walls, and would have the same problems associated with delaying cleanup for others.

Option 3. Note presence of vermiculite in walls if encountered, seal access points to wall and make minor repairs if necessary, and leave/manage in place (except walls in very poor condition).

Pros

1. Cost and duration of cleanup. The cost to seal walls, provide ongoing education, provide for free disposal at the landfill, buy HEPA vacs for all properties undergoing indoor cleanup, and other mitigation measures is insignificant compared to the cost to remove insulation from walls. The duration of cleanup is unaffected. Inconvenience to property owners is minimized.

2. Difficulty of working with property owners on restoration of their home is eliminated. The difficulty of coordinating and reconstruction of walls, matching wall paper, paint color, siding style, etc. would be tremendous.

3. Any current risk is mitigated. Amount of potential future health risk left behind is small and would only be present if the wall is breached. The future risk can also be easily managed or mitigated, and EPA's final decision on the site is subject to public input in the future.

Cons

1. We cannot state that all potential future risk eliminated.

2. There may be some impact to property value or resale ability. However, EPA has found at many other Superfund sites that once we say we've cleaned a property and deem it safe to live in (which we will in this case), it will sell fine even if there is some degree of ongoing management requirements.

3. Persons working in the wall in the future would have to deal with the insulation, just as they would when dealing with asbestos floor tiles, pipe wrap, and ceiling material or other hazardous building materials. Though situations will vary, this may include taking precautions such as working with a HEPA respirator, wetting surfaces down, properly disposing of insulation, vacuuming area with HEPA vacuum when finished. Hiring an asbestos certified contractor can be considered. This is an inconvenience and added cost to property owners. Also, all property owners may not follow guidance or be aware of it, and could be exposed to asbestos temporarily. Improper disposal may occur.